

L18000

255 005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

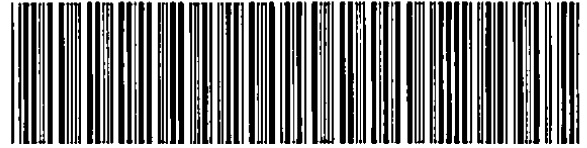
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/06/19--01010--030 **50.00

RECEIVED

AUG 05 2019

FILED
CLERK OF STATE
DIVISION OF CORPORATION
19 AUG -5 PM 1:03

LLC
Amend.
8/12/19
DC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IFIX CRACKED SCREENS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT TYLER WOOD

Name of Person

IFIX CRACKED SCREENS LLC

Firm/Company

1555 NORTH NOVA ROAD

Address

HOLLY HILL FLORIDA 32117

City/State and Zip Code

RTWOOD2577@GMAIL.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT TYLER WOOD

770 771-4170
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

19 AUG -5 PM 1:03
CLERK OF SUPERIOR COURT
STATE OF FLORIDA

IFIX CRACKED SCREENS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/30/2018 and assigned
Florida document number L18000255005

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

IFIX CRACKED SCREENS LLC C/O ROBERT WOOD

1555 N NOVA ROAD

HOLLY HILL, FL 32117

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

IFIX CRACKED SCREENS LLC C/O ROBERT WOOD

1555 N NOVA ROAD

HOLLY HILL, FL 32117

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ROBERT TYLER WOOD

New Registered Office Address:

1555 NORTH NOVA ROAD

Enter Florida street address

HOLLY HILL

City

Florida 32117

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Robert Tyler Wood
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	OMAR BADRAN		<input type="checkbox"/> Add
		3818 CHERRY GROVE COURT PORT ORANGE FL 32129	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MERJ BADRAN		<input type="checkbox"/> Add
		3818 CHERRY GROVE COURT PORT ORNAGE FL 32129	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ROBERT TYLER WOOD	1555 N NOVA ROAD HOLLY HILL FL 32117	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*
OMAR AND MERI BADRAN ARE TRANSFERRING 100% OWNERSHIP AND ANY ASSOCIATION

WITH IFIX CRACKED SCREENS LLC TO ROBERT TYLER WOOD, AS OF AUGUST 1, 2019.

AUGUST 1, 2019

E. Effective date, if other than the date of filing: _____ (optional)

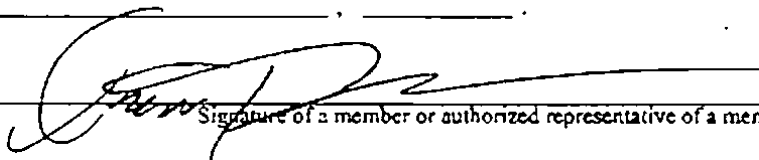
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 29, 2019



Signature of a member or authorized representative of a member

OMAR BADRAN

Typed or printed name of signer